Change pages for patch GMRV*4*7 of the Vitals/Measurements 4.0 user manual.

Change pages for Nursing 4.0 user manual are contained in NURS_4_P23_UM.PDF.

The following documentation change pages should be inserted before these replacement pages:

File Name:	Patch:
VITL_4_P1_UM.PDF	GMRV*4*1

Patch GMRV*4*7 pages:

Replace Pages:	With Pages:
iii-iv	iii-iv
4.1-4.20	4.1-4.22
5.1-5.18	5.1-5.14
IN.1-IN-4	IN.1-IN.4

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Chapter 4 Enter/Edit Vitals/Measurements

GMRV V/M ENTRY MENU

Vitals/Measurement Data Entry

Description:

This option permits users to enter different types of patient vitals signs and selected measurements into the clinical patient record system. Vitals/Measurements data is stored in the GMRV Vital Measurement (#120.5) file.

Additional Information:

Various vitals and other measurement data can be retrieved through any of the Vitals/Measurements Results Reporting menu options. If data was entered in error, the user can correct the misinformation through the Edit a Vitals/Measurements Entered in Error option.

Patient vital signs can be entered by patient, selected room and bed and by ward location (i.e., Hospital Location (#44) file). When vitals are entered, both a date and a time are required as well as hospital location. Vital signs and other patient measurements are documented in the specific order indicated by the vital type (temperature, weight, pulse oximetry). Data representing each vital type entry is also separated by a hyphen: Temp-Pulse-Resp-B/P-Height-Weight. To omit entering a vital/measurement reading:

> Enter 'N' or 'n' for the value when NOT documenting a reason for omission.
> Enter an * for the specific value when documenting the reason for omission.
> Enter a single * to document that all measurements were omitted and the reason for omission.

The software supports the documentation of measurement omissions by displayig three reasons (i.e., unavailable, pass, and refused) when an '*' is entered for a measurement value.

Pain tracking is included in the software, where a user can document the level of pain that the patient is experiencing by using the following pain scale:
    0   No pain
    1   (Minimal discomfort/pain) through 10 (worst imaginable pain)
    99 Unable to respond

Qualifiers (alpha characters appended to the measurement's numeric value) are used to provide additional information about the vital sign(s) and measurements taken by the clinician. Qualifiers are grouped by categories such as: location (e.g., right arm, left leg), position (e.g., lying, sitting, standing), method (e.g., cuff, Doppler, auscultate, assisted ventilator, T-piece), site (e.g., right, left), quality (e.g., actual, estimated), and cuff size (e.g., adult, small adult, pediatric). Vital types can be printed by category with their associated qualifiers and synonyms through the Display Vitals Category/Qualifier/Synonym Table option. When documenting patient vital signs and measurements, the user may see a listing of valid qualifiers by entering a '?' or '??'. The application coordinator has the ability to add qualifiers and change other software parameters through the Vitals/Measurements Site Files Menu option.

Note: After entering vitals/measurements information for a patient, the software displays this data and asks you, "Is this correct?   YES//". The user must answer YES to store the data after it is verified correct. If the user enters an '^' at the prompt, the application does NOT store the data and displays 'DATA DELETED' on the screen. Of course, if NO is entered after the prompt, patient information is NOT stored and all vitals/measurements data must be re-entered.

Defaults: The software has defaults for each vital/measurement except for blood pressure. These defaults are displayed when the clinician validates the measurements entered. The following list summarizes the software's defaults:
> Temperature - Oral
> Pulse - Radial
> Respirations - Spontaneous
> Height - Actual
> Weight - Actual

An application coordinator can change the temperature and pulse defaults through the Change Default Qualifiers for Temp./Pulse option.

Asterisks have two different meanings in the software.

1. When entering vitals/measurements information, the user may enter the * to prompt the software to display reasons for not documenting a measurement. The user then selects the most appropriate entry.

2. When an * appears in a report appended to a vitals/ measurement entry, the value of the measurement is either higher or lower than the acceptable value defined in the GMRV Vitals Parameters (#120.57) file. These file values can be edited by the package coordinator through the Edit Vitals Site Parameter File option.

All patient measurements are stored in the U.S. Customary System in File #120.5 and displayed in both U.S. customary units and metric equivalents. Small discrepancies between the entering and displaying of data is due to the conversion between scales.

Temperature scales are automatically defined by the software when a user does not append a 'F' or a 'C' to the numeric entry. A number that is larger than or equal to 45 will be considered as a Fahrenheit temperature, and any number less than 45 will be considered as a Centigrade temperature.

The scales for weight and height cannot be automatically determined. Therefore, the user must enter the scale (U.S. customary unit or metric equivalent) associated with the weight and height.

Menu Display:

```
Select OPTION NAME:  GMRVMGR                Vitals/Measurement

    1       Vitals/Measurement Data Entry ...
    2       Vitals/Measurements Results Reporting ...
    3       Edit a Vital/Measurement Entered in Error
    4       Vitals/Measurements Site Files Menu ...
```

Screen Prints:

```
Select Vitals/Measurement Option: 1  Vitals/Measurement Data Entry
ENTER DATE (TIME Required) VITALS WERE TAKEN: T@8  (APR 04, 1993@08:00)
```

The first prompt is a system parameter used to identify the date and time the vitals/ measurements were taken; time is required. The date/time is stamped on every vital/measurement that is entered into the system. The Change Date/Time Taken option allows the user to identify a new date/time the measurements were taken, a different vital type, or a new selection of patients without leaving the Vitals/ Measurement Data Entry menu. This Change Date/Time Taken option is further explained later in this chapter.

```
    1       TPR
    2       TPR B/P
    3       TPR B/P, Ht and Wt.
    4       TPR, B/P and Wt.
    5       Temp, Detailed PR and B/P
    6       Detailed B/P and Associated Pulse
    7       Pulse
    8       Weight
    9       Circumference/Girth
    10      Pulse Oximetry
    11      CVP (Central Venous Pressure)
    12      User Configurable Combination
    13      Change Date/Time Taken
    14      Pain

Select Vitals/Measurement Data Entry Option: 1  TPR
Vitals by (A)ll patients on a unit, (S)elected Rooms on unit, or
(P)atient? P
```

Example: Process for entering vitals for an individual patient:

Enter patient name.

```
Select PATIENT NAME: PARKER,PETER P.              --          500-1      YES
  SC VETERAN
```

Enter appropriate hospital location.

```
Select Hospital Location: 4E//  <RET>
```

```
To omit entering a vital/measurement reading:
Enter 'N' or 'n' for the value when NOT documenting a reason for omission.
Enter an * for the specific value when documenting the reason for omission.
Enter a single * to document that all measurements were omitted and the
reason for omission.
```

The temp-pulse-resp are entered at this prompt.

```
Temp-Pulse-Resp: 102.1-70-24
```

The following is representative of the software's on-line help:
** Temperature: a number + a location qualifier(optional), e.g., 99.6A
   or 99.6AX (F AXILLARY) or 37R (C RECTAL).
   Default: ORAL
   AXILLARY, CORE, ORAL, RECTAL, SKIN, TYMPANIC
** Pulse: a number + a location qualifier(optional), e.g., 70A or 70AP
   (70 APICAL).
   Default: RADIAL
   APICAL, BILATERAL PERIPHERALS, BRACHIAL, CAROTID, DORSALIS
PEDIS, FEMORAL, OTHER, PERIPHERAL, POPLITEAL, POSTERIOR TIBIAL,
RADIAL, ULNAR
** Respiration: a number(0-99 with no decimal places) + method qualifier
   (optional) e.g., 40C or 40c.
   Default: SPONTANEOUS
   ASSISTED VENTILATOR, CONTROLLED VENTILATOR, SPONTANEOUS
The entry should be in the following format:
    TTT.T-PPP-RR
To omit entering a vital/measurement reading:
Enter 'N' or 'n' for the value when NOT documenting a reason for omission.
Enter an * for the specific value when documenting the reason for omission.
Enter a single * to document that all measurements were omitted and the reason
for omission.

The data entry is one single string of alphanumeric characters with each
measurement separated by a hyphen (-). The software redisplays the data as:

```
    Temp.: 102.1 F  (38.9 C)* ORAL
    Pulse: 70 RADIAL
    Resp.: 24 SPONTANEOUS
```

Note the asterisk (*) following the value for temperature. An asterisk (*) following
data indicates that the value is higher or lower than the acceptable values which
are defined in the site configurable file GMRV Vitals Parameters (#120.57).

```
Is this correct? YES//  <RET>
```

At this point the user can reject or accept the entry. This is the last chance to change any possible errors during data entry. The user is able to correct errors at a later time using the error correction option (Edit a Vital/Measurement Entered in Error) which will be discussed later in this chapter.

```
Do you want to enter other V/M data for this patient? No//  <RET>  (No)

Select PATIENT NAME: <RET>
```

This option also supports entering patient vital signs and measurements for all patients on a ward or unit and by selected hospital rooms on a unit. Navigating through the software to document measurements for all patients on a unit is described next.

```
     1        TPR
     2        TPR B/P
     3        TPR B/P, Ht and Wt.
     4        TPR, B/P and Wt.
     5        Temp, Detailed PR and B/P
     6        Detailed B/P and Associated Pulse
     7        Pulse
     8        Weight
     9        Circumference/Girth
     10       Pulse Oximetry
     11       CVP (Central Venous Pressure)
     12       User Configurable Combination
     13       Change Date/Time Taken
     14       Pain

Select Vitals/Measurement Data Entry Option: 1  TPR
```

Select the measurement(s) you want to enter.

Example: Entering vitals for all of the patients on a particular unit.

```
Vitals by (A)ll patients on a unit, (S)elected Rooms on unit, or (P)atient? A
```

Enter the appropriate ward/unit name.

```
Select Unit: SICU

Begin entering patient vitals.

YGAFO,PAUL E            550-1  OK? YES//  <RET>
```

The clinician may enter patient information in the format described for the individual patient or bypass an entry by entering <RET>. The software indicates that no data was entered. The name of the next patient is displayed.

```
Temp-Pulse-Resp: <RET>

NO DATA ENTERED

Do you wish to stop looping through names? YES//  N   (NO)
```

When the clinician enters a NO behind the patient's name, he may continue to the next patient by answering NO to the question 'Do you wish to stop looping through names?', or exit by entering YES.

```
KJER,JAMES E            550-2  OK? YES// N  (NO)

KCCK,GEORGE R            560-1  OK? YES// <RET>  (YES)

Temp-Pulse-Resp: 100.2R-60A-34C

    Temp.: 100.2 F  (37.9 C) RECTAL
    Pulse: 60* APICAL
    Resp.: 34* CONTROLLED VENTILATOR
Is this correct? YES// <RET>

GEVFCC,MICHAEL E          560-10  OK? YES// N  (NO)
Do you wish to stop looping through names? YES// <RET>  (YES)
Enter return to continue <RET>


    1       TPR
    2       TPR B/P
    3       TPR B/P, Ht and Wt.
    4       TPR, B/P and Wt.
    5       Temp, Detailed PR and B/P
    6       Detailed B/P and Associated Pulse
    7       Pulse
    8       Weight
    9       Circumference/Girth
    10      Pulse Oximetry
    11      CVP (Central Venous Pressure)
    12      User Configurable Combination
    13      Change Date/Time Taken
    14      Pain

Select Vitals/Measurement Data Entry Option: 3  TPR B/P, Ht and Wt.
```

Example: Entering vital signs by selecting specific beds. The software prompts for entering information is identical with the previous two pathways, i.e., entering data by patient or by unit.

```
Vitals by (A)ll patients on a unit, (S)elected Rooms on unit, or (P)atient? S

Select Unit: SICU
```

Enter appropriate ward location.

```
Ward SICU has the following rooms:

1.    550-1
2.    550-2
3.    550-3
4.    550-4
5.    560-1
6.    560-10
7.    560-2
8.    570-1

Select the NUMBER(S) of the rooms: 5-6
```

Enter room or range of rooms to enter patient vitals.

```
Begin entering patient vitals.
```

```
KCCK,GEORGE R           560-1  OK? YES//  <RET>
```

The software loops through the patients located in Rooms 560-1 and 560-10 and the user enters the vitals/measurements values.

```
    1       TPR
    2       TPR B/P
    3       TPR B/P, Ht and Wt.
    4       TPR, B/P and Wt.
    5       Temp, Detailed PR and B/P
    6       Detailed B/P and Associated Pulse
    7       Pulse
    8       Weight
    9       Circumference/Girth
   10       Pulse Oximetry
   11       CVP (Central Venous Pressure)
   12       User Configurable Combination
   13       Change Date/Time Taken
   14       Pain
```

Example: Entering detailed B/P and associated pulse.

```
Select Vitals/Measurement Data Entry Option: 6  Detailed B/P and
Associated Pulse
Vitals by (A)ll patients on a unit, (S)elected Rooms on unit, or
(P)atient? P
Select PATIENT NAME:      PARKER,PETER P.          --          500-1     YES
   SC VETERAN

Select Hospital Location: 4E// <RET>    4E

To omit entering a vital/measurement reading:
Enter 'N' or 'n' for the value when NOT documenting a reason for omission.
Enter an * for the specific value when documenting the reason for omission.
Enter a single * to document that all measurements were omitted and the
reason for omission.

BP-Pulse: 120/70-60
```

The software displays selections for documenting detailed blood pressures. Each qualifier must be separated by a comma. The user is not required to enter qualifiers to proceed to the next prompt.

```
Qualifiers for BLOOD PRESSURE:

LOCATION            POSITION          METHOD             CUFF SIZE

1 L ARM             5 LYING           8 CUFF             12 ADULT
2 L LEG             6 SITTING         9 DOPPLER          13  LG ADULT
3 R ARM             7 STANDING        10 NON-INVASIVE    14 PEDIATRIC
4 R LEG                               11 PALPATED        15  SM ADULT
                                                         16 THIGH


Select a number under each category (optional).
Separate the numbers with ',': 1,6,8
  L ARM  SITTING  CUFF
```

The software displays selections for documenting detailed pulse.

```
Qualifiers for PULSE:

 SITE              METHOD              POSITION

 1 LEFT            3 AUSCULTATE        6 LYING
 2 RIGHT           4 DOPPLER          7 SITTING
                   5 PALPATED          8 STANDING


Select a number under each category (optional).
Separate the numbers with ',': 1
  LEFT

  B/P: 120/70   L ARM  SITTING  CUFF
  Pulse: 60* RADIAL  LEFT
Is this correct? YES// <RET>
```

After reviewing the entry, a user can reject or accept the data. This is the last chance to change any possible errors during data entry. The user is able to correct errors at a later time using the error correction option, Edit a Vital/Measurement Entered in Error, which will be discussed later in this chapter.

```
Enter another B/P? NO// <RET>
```

If YES is entered, the user can enter another B/P and pulse under the same time for a different position, location, etc..

```
     1       TPR
     2       TPR B/P
     3       TPR B/P, Ht and Wt.
     4       TPR, B/P and Wt.
     5       Temp, Detailed PR and B/P
     6       Detailed B/P and Associated Pulse
     7       Pulse
     8       Weight
     9       Circumference/Girth
    10       Pulse Oximetry
    11       CVP (Central Venous Pressure)
    12       User Configurable Combination
    13       Change Date/Time Taken
    14       Pain
```

Example: Girth measurement.

```
Select Vitals/Measurement Data Entry Option: 9  Circumference/Girth
Vitals by (A)ll patients on a unit, (S)elected Rooms on unit, or
(P)atient? P
Select PATIENT NAME:     PARKER,PETER P.          --          500-1      YES
   SC VETERAN

Select Hospital Location: 4E// <RET>
```

```
To omit entering a vital/measurement reading:
Enter 'N' or 'n' for the value when NOT documenting a reason for omission.
Enter an * for the specific value when documenting the reason for omission.
Enter a single * to document that all measurements were omitted and the
reason for omission.
```

The following is representative of the software's on-line help:
** Circumference: a number + 'I' or 'C' (2 decimals allowed)
  For example: 72.25I (inches)   147C (centimeters)
The entry should be in the following format:
   NNN.NN

```
Circumference/Girth: 32.25I

Qualifiers for CIRCUMFERENCE/GIRTH:

LOCATION             SITE

1 ABDOMINAL          10 LEFT
2 ANKLE              11 RIGHT
3 CALF
4 HEAD
5 LOWER ARM
6 OTHER
7 THIGH
8 UPPER ARM
9 WRIST
```

The user identifies the type of circumference.

```
Enter a number under each category, separate numbers with a ','
DO NOT select SITE if this is a HEAD/ABDOMINAL girth measurement: 1
  ABDOMINAL

  Circumference/Girth: 32.25 IN (81.92 CM)   ABDOMINAL
Is this correct? YES// Y
```

Example: Circumference of left lower arm.

```
To omit entering a vital/measurement reading:
Enter 'N' or 'n' for the value when NOT documenting a reason for omission.
Enter an * for the specific value when documenting the reason for omission.
Enter a single * to document that all measurements were omitted and the
reason for omission.

Circumference/Girth: 12.25I

Qualifiers for CIRCUMFERENCE/GIRTH:

LOCATION             SITE

1 ABDOMINAL          10 LEFT
2 ANKLE              11 RIGHT
3 CALF
```

```
4 HEAD
5 LOWER ARM
6 OTHER
7 THIGH
8 UPPER ARM
9 WRIST


Enter a number under each category, separate numbers with a ','
DO NOT select SITE if this is a HEAD/ABDOMINAL girth measurement: 5,10
  LOWER ARM  LEFT

  Circumference/Girth: 12.25 IN (31.12 CM)   LOWER ARM  LEFT
Is this correct? YES// <RET>


Do you want to enter other V/M data for this patient? No// <RET>  (No)


    1       TPR
    2       TPR B/P
    3       TPR B/P, Ht and Wt.
    4       TPR, B/P and Wt.
    5       Temp, Detailed PR and B/P
    6       Detailed B/P and Associated Pulse
    7       Pulse
    8       Weight
    9       Circumference/Girth
    10      Pulse Oximetry
    11      CVP (Central Venous Pressure)
    12      User Configurable Combination
    13      Change Date/Time Taken
    14      Pain
```

Example: Pulse Oximetry.

```
Select Vitals/Measurement Data Entry Option: 10  Pulse Oximetry
Vitals by (A)ll patients on a unit, (S)elected Rooms on unit, or
(P)atient? P
Select PATIENT NAME:     PARKER,PETER P.        --         500-1    YES
  SC VETERAN
```

Answer with patient name.

```
Select Hospital Location: 4E// <RET>    4E
```

Enter appropriate hospital location.

```
To omit entering a vital/measurement reading:
Enter 'N' or 'n' for the value when NOT documenting a reason for omission.
Enter an * for the specific value when documenting the reason for omission.
Enter a single * to document that all measurements were omitted and the
reason for omission.
```

The following is representative of the software's on-line help:
** Pulse Oximetry: Enter the numeric value of the patients O2 saturation obtained via pulse oximetry. The value will be interpreted as a percentage.
The entry should be in the following format:
    NNN

```
PO2: 89
```

At this prompt the user may indicate that patient was receiving oxygen at the time the pulse oximetry reading was taken. If YES is entered, additional information on the flow rate, O2 concentration, and method of O2 administration can be entered.

```
Is the patient on supplemental oxygen? Yes// <RET>  (Yes)
```

Enter a number between 0.5-20 for liters/minute, and/or 21-100 for percent of oxygen concentration. If you wish to enter both rates, separate the values with a ','.

```
Enter the numeric value(s) for amount of supplemental oxygen provided
(Separate values with a ','): 3.5,40

Oxygen is supplied by

     1 AEROSOL/HUMIDIFIED MASK
     2 FACE TENT
     3 MASK
     4 NASAL CANNULA
     5 NON RE-BREATHER
     6 PARTIAL RE-BREATHER
     7 T-PIECE
     8 TRACHEOSTOMY COLLAR
     9 VENTILATOR
     10 VENTURI MASK
Enter a number: 1

  Pulse Ox.: 89 % with supplemental O2 40% 3.5 l/min
                    via AEROSOL/HUMIDIFIED MASK
Is this correct? YES// <RET>


Do you want to enter other V/M data for this patient? No// <RET>  (No)


     1        TPR
     2        TPR B/P
     3        TPR B/P, Ht and Wt.
     4        TPR, B/P and Wt.
     5        Temp, Detailed PR and B/P
     6        Detailed B/P and Associated Pulse
     7        Pulse
     8        Weight
     9        Circumference/Girth
     10       Pulse Oximetry
     11       CVP (Central Venous Pressure)
     12       User Configurable Combination
     13       Change Date/Time Taken
     14       Pain
```

Example: Central Venous Pressure (CVP).

```
Select Vitals/Measurement Data Entry Option: 11  CVP (Central Venous
Pressure)
Vitals by (A)ll patients on a unit, (S)elected Rooms on unit, or
(P)atient? P
Select PATIENT NAME:      PARKER,PETER P.          --          500-1     YES
   SC VETERAN

Select Hospital Location: 4E// <RET>    4E

To omit entering a vital/measurement reading:
Enter 'N' or 'n' for the value when NOT documenting a reason for omission.
Enter an * for the specific value when documenting the reason for omission.
Enter a single * to document that all measurements were omitted and the
reason for omission.
```

The following is representative of the software's on-line help:
** Central venous pressure: a number for cmH2O measurement or a number + 'G'
for mmHg measurement (1 decimal allowed).
A negative number can be entered up to and including -13 cmH2O or -9.6 mmHg.
The entry should be in the following format:
   NN

```
CVP: 14G

  CVP: 19.04 cmH2O (14.0  mmHg)
Is this correct? YES// <RET>


Do you want to enter other V/M data for this patient? No// <RET>   (No)


   1        TPR
   2        TPR B/P
   3        TPR B/P, Ht and Wt.
   4        TPR, B/P and Wt.
   5        Temp, Detailed PR and B/P
   6        Detailed B/P and Associated Pulse
   7        Pulse
   8        Weight
   9        Circumference/Girth
   10       Pulse Oximetry
   11       CVP (Central Venous Pressure)
   12       User Configurable Combination
   13       Change Date/Time Taken
   14       Pain
```

Example: User Configurable Combination.

```
Select Vitals/Measurement Data Entry Option: 12  User Configurable
Combination
```

This option allow the users to create their own vital signs and measurements combination(s). Although these selections display all prompts that suppport documentation of detailed measurements, the user can bypass these prompts.

```
Select the combination of Vitals/Measurements you want to enter.

1  T
2  P
3  R
4  B/P
5  Wt
6  Ht
7  Circumference/Girth
8  Pulse Oximetry
```

Data on weight and height is documented on a patient.

```
Select from 1 to 9 (enter 1,3-5 etc.) or ^ to exit: 5,6
Vitals by (A)ll patients on a unit, (S)elected Rooms on unit, or
(P)atient? P
Select PATIENT NAME:      PARKER,PETER P.          --         500-1    YES
   SC VETERAN

Select Hospital Location: 4E// <RET>

To omit entering a vital/measurement reading:
Enter 'N' or 'n' for the value when NOT documenting a reason for omission.
Enter an * for the specific value when documenting the reason for omission.
Enter a single * to document that all measurements were omitted and the
reason for omission.
```

The following is representative of the software's on-line help:
** Weight: a number+L(l) or a number+K(k) + 2nd quality (optional) 2
decimals allowed, e.g., 120.25L or 120l (pounds),
   45.25K or 45k (kilograms).
   120L, 120LA, or 120K for actual weight.
   Default: ACTUAL
   ACTUAL, DRY, ESTIMATED
** Height: a number + ',' + qualifier (2 decimals allowed)
   72I (inches)   147C or 147CM (centimeters)
   5F10I;E or 5FT10IN;E or 5'10";E (for 5 feet 10 inches ESTIMATED)
   Default: ACTUAL
   ACTUAL, ESTIMATED
The entry should be in the following format:
   WWW.WW-HH

```
Ht.-Wt.: 5'6";E-165.25LE

Qualifiers for WEIGHT:

 METHOD

 1 BED
 2 CHAIR
 3 STANDING
```

The user may enter a method indicating how the weight was taken or enter <RET> to display, and the then validate data.

```
Select a number under each category (optional).
Separate the numbers with ',': 1
  BED

  Wt.: 165.25 LB  (75.11 KG) ESTIMATED  BED
  Ht.: 5 FT 6 IN (167.64 CM) ESTIMATED
Is this correct? YES// <RET>


Do you want to enter other V/M data for this patient? No// <RET>  (No)


  1      TPR
  2      TPR B/P
  3      TPR B/P, Ht and Wt.
  4      TPR, B/P and Wt.
  5      Temp, Detailed PR and B/P
  6      Detailed B/P and Associated Pulse
  7      Pulse
  8      Weight
  9      Circumference/Girth
  10     Pulse Oximetry
  11     CVP (Central Venous Pressure)
  12     User Configurable Combination
  13     Change Date/Time Taken
  14     Pain
```

Example: Change Date/Time Taken.

```
Select Vitals/Measurement Data Entry Option: 7  Pulse
```

When information is entered using the All patients on a unit or the Selected Rooms on a unit pathway, the user may enter new data with out exiting and re-entering the option by selecting (13) Change Date/Time Taken. This option prompts for a new date/time measurements were taken, a different vital type, and a new selection of patients. As an example, the user documents 6 am pulse readings for 2AS patients, then enters the Change Date/Time Taken option and documents 8 am weights.

```
Vitals by (A)ll patients on a unit, (S)elected Rooms on unit, or (P)atient? A
Select Unit: 2AS
Begin entering patient vitals.

ANESMJS,ESTELL H            OK? YES// <RET>

To omit entering a vital/measurement reading:
Enter 'N' or 'n' for the value when NOT documenting a reason for omission.
Enter an * for the specific value when documenting the reason for omission.
Enter a single * to document that all measurements were omitted and the
reason for omission.

Pulse: 86
```

```
Qualifiers for PULSE:

 SITE               METHOD              POSITION

 1 LEFT            3 AUSCULTATE        6 LYING
 2 RIGHT           4 DOPPLER          7 SITTING
                   5 PALPATED         8 STANDING


Select a number under each category (optional).
Separate the numbers with ',': 1,3,7
  LEFT  AUSCULTATE  SITTING

  Pulse: 86 RADIAL  LEFT  AUSCULTATE  SITTING
Is this correct? YES// <RET>
                    .
                    .
                    .
```

The user continues to enter 6 am pulse readings, until he selects the Change
Date/Time Taken option to enter 8 am weights.

```
Do you wish to stop looping through names? YES//<RET>
Enter return to continue <RET>


     1        TPR
     2        TPR B/P
     3        TPR B/P, Ht and Wt.
     4        TPR, B/P and Wt.
     5        Temp, Detailed PR and B/P
     6        Detailed B/P and Associated Pulse
     7        Pulse
     8        Weight
     9        Circumference/Girth
     10       Pulse Oximetry
     11       CVP (Central Venous Pressure)
     12       User Configurable Combination
     13       Change Date/Time Taken
     14       Pain
```

At the next prompt, the user enters, 13, to enter another date/time, new vital types
and select patient(s).

```
Select Vitals/Measurement Data Entry Option: 13  Change Date/Time Taken
ENTER DATE (TIME Required) VITALS WERE TAKEN: T@8:00  (MAR 03, 1997@08:00)


     1        TPR
     2        TPR B/P
     3        TPR B/P, Ht and Wt.
     4        TPR, B/P and Wt.
     5        Temp, Detailed PR and B/P
     6        Detailed B/P and Associated Pulse
     7        Pulse
     8        Weight
     9        Circumference/Girth
     10       Pulse Oximetry
     11       CVP (Central Venous Pressure)
     12       User Configurable Combination
     13       Change Date/Time Taken
     14       Pain
```

```
Select Vitals/Measurement Data Entry Option: 8  Weight
Vitals by (A)ll patients on a unit, (S)elected Rooms on unit, or (P)atient? A
Select Unit: 2AS
Begin entering patient vitals.

ANESMJS,ESTELL H            OK? YES// <RET>

To omit entering a vital/measurement reading:
Enter 'N' or 'n' for the value when NOT documenting a reason for omission.
Enter an * for the specific value when documenting the reason for omission.
Enter a single * to document that all measurements were omitted and the
reason for omission.

Wt.: 400L


Qualifiers for WEIGHT:

 METHOD

 1 BED
 2 CHAIR
 3 STANDING

Select a number under each category (optional).
Separate the numbers with ',': 2
  CHAIR

  Wt.: 400 LB  (181.82 KG) ACTUAL  CHAIR
Is this correct? YES// <RET>
```

The user continues to select the patients that have 8 am weight readings and exits when documentation is completed.

```
    1      TPR
    2      TPR B/P
    3      TPR B/P, Ht and Wt.
    4      TPR, B/P and Wt.
    5      Temp, Detailed PR and B/P
    6      Detailed B/P and Associated Pulse
    7      Pulse
    8      Weight
    9      Circumference/Girth
   10      Pulse Oximetry
   11      CVP (Central Venous Pressure)
   12      User Configurable Combination
   13      Change Date/Time Taken
   14      Pain
```

Example: Pain.

```
Select Vitals/Measurement Data Entry Option: 14  Pain
Vitals by (A)ll patients on a unit, (S)elected Rooms on unit, or
(P)atient? P
Select PATIENT NAME:    PARKER,PETER P.         --         500-1     YES
   SC VETERAN

Select Hospital Location: 4E// <RET>   4E
```

```
Enter an * for the specific value when documenting the reason for omission.
Enter a single * to document that all measurements were omitted and the
reason for omission.
```

The following is representative of the software's on-line help:
** Pain: Enter a numeric value. 0 for no pain. 1-10 for pain scale
   10 is worst imaginable pain or enter 99 if the patient is unable to respond
   For example: 99 or 5
The entry should be in the following format:
   NN

```
Pain: 3


  Pain: 3
Is this correct? YES// <RET>


Do you want to enter other V/M data for this patient? No// <RET>  (No)
```

Menu Access:

The Vitals/Measurement Data Entry option is accessed through the
Vitals/Measurement menu.

GMRV ERROR EDIT

Edit a Vital/Measurement Entered in Error

Description:

This option allows users to correct errors in vitals/measurements. When data is edited, a new record is created, and the old record is marked entered in error. Vitals/measurements data is stored in the GMRV Vital Measurement (#120.5) file.

Additional Information:

Vitals/measurements data can be retrieved through the Print Vitals Entered in Error for a Patient option. The information entered through this option is also reflected in the Cumulative Vitals Report.

Menu Display:

```
Select OPTION NAME:  GMRVMGR              Vitals/Measurement

    1       Vitals/Measurement Data Entry ...
    2       Vitals/Measurements Results Reporting ...
    3       Edit a Vital/Measurement Entered in Error
    4       Vitals/Measurements Site Files Menu ...
```

Screen Prints:

```
Select Vitals/Measurement Option: 3  Edit a Vital/Measurement Entered in Error

Select PATIENT NAME: PARKER,PETER P.        08-04-18    931848807    SC
VETERAN
```

Answer with patient name.

```
Select DATE (TIME optional) of this error: T  (APR 04, 1993)
```

Enter an appropriate date. When the exact time is not remembered, the user may enter the date, and all entries for that date display.

```
CHOOSE FROM:

    1  APR  4, 1993@08:00
       BP: 120/80  (R ARM/LYING)
       T: 102.1 F (38.9 C)* (ORAL)
       R: 24 (SPONTANEOUS)
       P: 70  (RADIAL)
    2  APR  4, 1993@08:01
       BP: 130/85  (L ARM/LYING)
```

```
Select VITAL/MEASUREMENT from the above list: 1
```

Enter the number of the measurement or group of measurements you want to enter in error.

A detailed summary of the data is provided.

```
*** DATA TO BE ENTERED IN ERROR ***
APR  4, 1993@08:00
  BP:  120/80 R ARM/LYING
  T:   102.1 F (38.9 C)* ORAL
  R:   24 (SPONTANEOUS)
  P:   70 RADIAL

Select a VITAL type record, or press return to correct DATE/TIME, PATIENT
or set INVALID for the record: RESPIRATION
```

In this example, the respirations were incorrectly documented. The user must select an appropriate reason(s) from 1-4.

In this case, the invalid record selection (4) cannot be used in combination with 1, 2, or 3. The user receives the following prompt.

```
    1   INCORRECT DATE/TIME
    2   INCORRECT READING
    3   INCORRECT PATIENT
    4   INVALID VITAL/RECORD

  The INVALID RECORD reason cannot be used in combination with any
  other selections.
```

The following are examples of identifying incorrect patient data using the above four selections:

INCORRECT DATE/TIME: changes the date/time that a vital measurement was taken for a patient.

```
Select the reason(s) for entering this vital/measurement in error: 1
Enter new date/time vitals were taken: 9A  (APR 04, 1993@09:00)
```

INCORRECT READING: changes the data for a vital/measurement that was taken for a patient. The following prompt displays only if a single/specific vital has been identified for editing.

```
Select the reason(s) for entering this vital/measurement in error: 2

NEW RESPIRATION: 20A
..
```
The corrected information is entered.

INCORRECT PATIENT: changes the patient for a particular vital measurement (e.g., the data was entered for the wrong patient).

```
Select the reason(s) for entering this vital/measurement in error:  3
Select the NEW Patient's name:  STARK,ANTHONY L.          01-19-25     589632111
   NSC VETERAN
```

INVALID VITAL/RECORD: deletes the record without adding any new data. In actuality, the bad record is still in the computer, but is not a part of the current patient data.

```
Select the reason(s) for entering this vital/measurement in error:  4
```

If a combination of the above applies, choices can be selected at one time as described below.

```
Select PATIENT NAME:  GEVFCC,MICHAEL E          03-22-22     541969342     NSC
VETERAN

Select DATE (TIME optional) of this error:  T  (APR 04, 1993)
CHOOSE FROM:

    1   APR  4, 1993@08:00
        BP: 120/80
        T: 100.4 F (38.0 C)  (ORAL)
        R: 20 (SPONTANEOUS)
        P: 80  (RADIAL)
        HT: 5 FT 8 IN (172.72 CM)
        WT: 200 LB (90.91 KG)  (ACTUAL)

Select VITAL/MEASUREMENT from the above list:  1

*** DATA TO BE ENTERED IN ERROR ***
APR  4, 1993@08:00
  BP:  120/80
  T:  100.4 F (38.0 C) ORAL
  R:  20 (SPONTANEOUS)
  P:  80 RADIAL
  HT:  5 FT 8 IN (172.72 CM)
  WT:  200 LB (90.91 KG) ACTUAL

Select a VITAL type record, or press return to correct DATE/TIME, PATIENT
or set INVALID for the record:  RESPIRATION

    1   INCORRECT DATE/TIME
    2   INCORRECT READING
    3   INCORRECT PATIENT
    4   INVALID VITAL/RECORD
Select the reason(s) for entering this vital/measurement in error:  1-3
Enter new date/time vitals were taken:  9A  (APR 04, 1993@09:00)

NEW RESPIRATION:  24A
Select the NEW Patient's name:  STARK,ANTHONY L.          01-19-25     589632111
   NSC VETERAN
```

```
Select DATE (TIME optional) of this error: T  (APR 05, 1993)
CHOOSE FROM:

    1  APR  5, 1993@08:00
       BP: 130/80  (L ARM/LYING)
       T: 101.2 F (38.4 C)  (RECTAL)
       R: 20  (ASSISTED VENTILATOR)
       P: 80  (APICAL)

Select VITAL/MEASUREMENT from the above list: 1

*** DATA TO BE ENTERED IN ERROR ***
APR  5, 1993@08:00
  BP:  130/80 L ARM/LYING
  T:   101.2 F (38.4 C) RECTAL
  R:   20 ASSISTED VENTILATOR
  P:   80 APICAL

Select a VITAL type record, or press return to correct DATE/TIME, PATIENT
or set INVALID for the record: <RET>

    1  INCORRECT DATE/TIME
    2  INCORRECT PATIENT
    3  INVALID VITAL/RECORD
Select the reason(s) for entering these vital/measurements in error:
```

Menu Access:

The Edit a Vital/Measurement Entered in Error option is accessed through the
Vitals/Measurement menu.

Chapter 5 Vitals/Measurements Reports

GMRV PRINT MENU

Vitals/Measurements Results Reporting

Description:

This menu contains options which allow the users to print various types of vitals/ measurements reports. Data printed on these reports is stored in the GMRV Vital Measurement (#120.5) file.

Additional Information:

Data printed in these reports was entered through the Vitals/Measurement Data Entry option, or the Edit a Vital/Measurement Entered in Error option. All abnormal patient values are identified on the vitals/measurements reports by an asterisk (*). Patient vital signs and measurements can be printed by patient, selected room and bed and by ward location (i.e., entry in the Hospital Location (#44) file). All vitals/measurements data for a patient is reflected on the Cumulative Vitals Report and the Vital Signs Record (SF 511) graphic report. The division name is obtained from the Hospital Location (#44) file.

Menu Display:

```
Select OPTION NAME:  GMRVMGR              Vitals/Measurement

   1      Vitals/Measurement Data Entry ...
   2      Vitals/Measurements Results Reporting ...
   3      Edit a Vital/Measurement Entered in Error
   4      Vitals/Measurements Site Files Menu ...

Select Vitals/Measurement Option: 2  Vitals/Measurements Results Reporting


   1      V/M Graphic Reports
   2      Latest Vitals Display for a Patient
   3      Latest Vitals by Location
   4      Cumulative Vitals Report
   5      Print Vitals Entered in Error for a Patient
```

Menu Access:

The Vitals/Measurements Results Reporting option is accessed through the Vitals/Measurement menu.

GMRV SF511

V/M Graphic Reports

Description:

This option provides the user with 5 different reports, the first is a report simulating the Standard Form 511 - Vital Signs Record (Vital Flow Sheet), second is a B/P Plotting Chart, third is a Weight Chart, fourth is a Pulse Oximetry/ Respiratory Graph, and last is a Pain Chart. Patient information contained in this report is stored in the GMRV Vital Measurement (#120.5) file, and the GMRY Patient I/O (#126) file.

Additional Information:

The information printed in this report was entered through the Vitals/ Measurements and the GMRY Intake and Output applications. All 24 hour intake and output totals are in cubic centimeters (i.e., milliliters). Reports can be printed by selected patient, for all patients on a ward, and for patients in a specific hospital room/bed. Refer to Printer Issues in the Package Management section for additional information on setting up Kyocera F-800A and Hewlett-Packard LaserJet printers for printing linear graphic reports. Users may print the graphic reports using a dot matrix printer, data plotted is not connected by lines.

Menu Display:

```
Select Vitals/Measurement Option: 2  Vitals/Measurements Results Reporting


    1       V/M Graphic Reports
    2       Latest Vitals Display for a Patient
    3       Latest Vitals by Location
    4       Cumulative Vitals Report
    5       Print Vitals Entered in Error for a Patient
```

Screen Prints:

```
Select Vitals/Measurements Results Reporting Option: 1  V/M Graphic Reports

  1  Vital Signs Record
  2  B/P Plotting Chart
  3  Weight Chart
  4  Pulse Oximetry/Respiratory Graph
  5  Pain Chart

  Select a number between 1 and 5: 1  Vital Signs Record// <RET>

Vitals by (A)ll patients on a ward, (S)elected Rooms on ward, or (P)atient? P
```

Enter the patient's name.

```
Select PATIENT NAME:    STARK,ANTHONY L.      01-19-25     589632111     NSC
VETERAN
```

Enter appropriate start date.

`Start DATE (TIME optional): T-7//`**`4/1/97`**`  (APR 01, 1997)`

Enter appropriate end date.

`Go to DATE (TIME optional): NOW//` **`4/22/97`** `(APR 22, 1997)`

`DEVICE:`Enter appropriate response

This report must be queued to a line printer or sent to a slave printer configured to print a 132 column report.

The following is an example of an SF511 (Vital Signs Record) graph sent to a dot matrix printer:

```
    Date/Time  04/01/97 04/02/97 04/02/97 04/02/97 04/02/97 04/03/97 04/03/97 04/03/97 04/17/97 04/22/97
               08:00    10:19    10:19    11:03    11:49    07:06    10:54    10:58    14:56    10:53
  Pulse Temp/F/C ------------------------------------------------------------------------------------------

 160  105/40.6-                                     T*

 150  104/40.0-

 140  103/39.4-

 130  102/38.9-                            T*                                T*

 120  101/38.3-                                         P*

 110  100/37.8-         T                                                              T

 100   99/37.2-                                               T                             P
       98.6/37.0- -------- -------- -------- -------- -------- -------- -------- -------- -------- --------
  90   98/36.7-                                                   T

  80   97/36.1-              P                  P                     P                          P
                                                                                   P
  70   96/35.6-                                                          P

  60   95/35.0-

  50   94/34.4-

                              P**
                   -------- -------- -------- -------- -------- -------- -------- -------- -------- --------
Temperature                 100.0 A           102.0*T  105.0*R  99.0 T   98.0 T   102.0*T  100.5 T
Pulse                       77       45*      76       120*     80  Lt   72       82 Lt    99       88
                            A Aus    Rad Pal  Rad      A Pal    Rad Aus Ly Rad     Rad Aus Ly Rad   Lt Rad Si
Respiration        0*S      22 S Si           30*S     45*AV Ly 20 S Ly  14 S     12 S Ly  33*S
Pulse Ox.          80                                  70*                        92
  L/Min            2.5                                  2                          4
  %               30
  Method                                               NC                         AM
BLOOD                       99/88    120/80   144/90   200/100  120/88   130/90   132/92            167/97
  PRESSURE                  RA                         LA       LA                LA
                            Si Cu Ad Si Dop            Ly N-I LgA Ly Cu Ad       Ly Cu Ad           LA SmA
Weight (lb)                                            166.00 D C        140.00 A 152.00 A
     (kg)                                              75.45             63.64    69.09
Body Mass Index                                        23                19       20
Height (in)        73.00 A                             72.00             73.00 E  73.00
     (cm)          185.42                              182.88            185.42   185.42
C/G (in)                                               12.00 Ank                  52.00 Abd
   (cm)                                                30.48                       132.08
CVP (cm H2O)                                           22.0                        29.9*
    (mm Hg)                                            16.2                        22.0*
Intake(24 Hr)(cc)
Output(24 Hr)(cc)
Pain                        5                 4                          0
                   -------------------------------------------------------------------------------------------
```

T: Temperature   P: Pulse   C/G: Circumference/Girth   * - Abnormal value   ** - Abnormal value off of graph

TEMP - A: Axillary R: Rectal T: Tympanic   PULSE - A: Apical Aus: Auscultate Lt: Left Ly: Lying Pal: Palpated
Rad: Radial Si: Sitting   RESP - AV: Assisted ventilator Ly: Lying S: Spontaneous Si: Sitting   BP - Ad: Adult
Cu: Cuff Dop: Doppler LA: L arm LgA: Lg adult Ly: Lying N-I: Non-invasive RA: R arm Si: Sitting SmA: Sm adult
 HT - A: Actual E: Estimated   WT - A: Actual C: Chair D: Dry   PULSE OX - AM: Aerosol/humidified mask NC:
Nasal cannula   CIRC/GIRTH - Abd: Abdominal Ank: Ankle
STARK,ANTHONY L. 112-33-4443 NOV 4,1985 11 YRS MALE   MEDICAL RECORD
Unit: ICU   Room: 4M1-A   VITAL FLOW SHEET
Division: HINES   Page 1   VAF 10-7987 VICE SF 511
APR 1,1997 - APR 22,1997@24:00

The B/P Plotting Chart, Weight Chart, and Pulse Oximetry/Respiratory Graph have basically the same appearance with different data. When printing these graphic reports to a Kyocera F-800A or a Hewlett-Packard LaserJet printer, the data on the graph will be connected with lines. The Pain Chart can only be printed on a Hewlett-Packard LaserJet printer.

Menu Access:

The V/M Graphic Reports option is accessed through the Vitals/Measurements Results Reporting option of the Vitals/Measurement menu.

GMRV DISPLAY V/M

Latest Vitals Display for a Patient

Description:

This option prints the latest vitals/measurements for an individual patient. Patient data is retrieved from the GMRV Vital Measurement (#120.5) file.

Additional Information:

Data displayed in this report is entered through the Vitals/Measurement Data Entry option, or the Edit a Vital/Measurement Entered in Error option. This report includes vitals/measurements obtained as an outpatient, inpatient, or both.

Menu Display:

```
Select Vitals/Measurement Option: 2  Vitals/Measurements Results Reporting


    1       V/M Graphic Reports
    2       Latest Vitals Display for a Patient
    3       Latest Vitals by Location
    4       Cumulative Vitals Report
    5       Print Vitals Entered in Error for a Patient
```

Screen Prints:

```
Select Vitals/Measurements Results Reporting Option: 2  Latest Vitals Display
for a Patient

Select PATIENT NAME:      STARK,ANTHONY L.       01-19-25     589632111     NSC
VETERAN
```

DEVICE: Enter appropriate response

```
MAR 25,1997 (11:21)       LATEST VITALS REPORT                      PAGE 1
--------------------------------------------------------------------------

4M1-A        STARK,ANTHONY L.     112-33-4443

Temp.:       (03/21/97@09:48) 99.4 F  (37.4 C)(ORAL)
Pulse:       (03/21/97@09:48) 55*(RADIAL)
Resp.:       (03/21/97@09:48) 20
Pulse Ox:    (03/21/97@09:48) 99% with supplemental O2 30% 3L/min
                              - VENTURI MASK
B/P:         (03/13/97@09:28) 120/80
Ht.:         (03/20/97@10:39) 2 ft 10 in (86.36 cm)
Wt.:         (03/20/97@10:39) 500 lb  (227.27 kg)(ACTUAL, BED)
BMI:                          305*
CVP:         (03/21/97@09:48) 24 cmH2O (17.6  mmHg)
Circ/Girth:  (01/23/97@08)    32.1 in (81.53 cm)(ABDOMINAL)
Pain:        (03/22/97@09:22) 5
```

```
Press return to continue <RET>
```

Menu Access:

The Latest Vitals Display for a Patient option is accessed through the Vitals/
Measurements Results Reporting option of the Vitals/Measurement menu.

GMRV V/M BY LOCATION

Latest Vitals by Location

Description:

This option prints the latest vitals/measurements for all patients on a specific ward. Vitals data for a patient is stored in the GMRV Vital Measurement (#120.5) file.

Additional Information:

Data printed in this report is entered through the Vitals/Measurement Data Entry option, or the Edit a Vital/Measurement Entered in Error option.

Menu Display:

```
Select Vitals/Measurement Option: 2  Vitals/Measurements Results Reporting


    1      V/M Graphic Reports
    2      Latest Vitals Display for a Patient
    3      Latest Vitals by Location
    4      Cumulative Vitals Report
    5      Print Vitals Entered in Error for a Patient
```

Screen Prints:

```
Select Vitals/Measurements Results Reporting Option: 3  Latest Vitals by
Location

Select WARD LOCATION NAME: MICU
```

Enter appropriate ward name.

DEVICE: Enter appropriate response

```
MAR 25,1997 (11:22) VITALS REPORT FOR UNIT: MICU - HINES, IL          PAGE 1
-----------------------------------------------------------------------------

            TRAMG,HENRY                 793-13-3012

Temp.:       (03/20/97@1)      99.6 F  (37.6 C)(ORAL)
Pulse:       (03/20/97@1)       88(RADIAL)
Resp.:       (03/20/97@1)       24
B/P:         (07/17/96@14:58) 120/80


Press return to continue or "^" to quit <RET>
```

```
MAR 25,1997 (11:22) VITALS REPORT FOR UNIT: MICU - HINES, IL          PAGE 2
----------------------------------------------------------------------------

500-1          PARKER,PETER P.

Temp.:         (03/20/97@1)     100 F  (37.8 C)(ORAL)
Pulse:         (03/20/97@1)     55*(RADIAL)
Resp.:         (03/20/97@1)     20
Pulse Ox:      (02/20/97@07)    89% with supplemental O2 40% 3.5L/min
                                - AEROSOL/HUMIDIFIED MASK
B/P:           (02/21/97@14:17) 120/70(L ARM, LYING, CUFF)
Ht.:           (02/20/97@08)    6 ft  (182.88 cm)(ESTIMATED)
Wt.:           (02/20/97@08)    200 lb  (90.91 kg)
BMI:                            27
CVP:           (02/21/97@14:28) 19.04 cmH2O (14.0  mmHg)
Circ/Girth:    (02/21/97@14:28) 32.25 in (81.92 cm)(THIGH)
Pain:          (03/22/97@09:22) 5

Press return to continue <RET>
```

Menu Access:

The Latest Vitals by Location option is accessed through the Vitals/Measurements Results Reporting option of the Vitals/Measurement menu.

GMRV CUMULATIVE V/M

Cumulative Vitals Report

Description:

This option prints vitals/measurement information for patients over a user specified period of time. Data comes from the GMRV Vital Measurement (#120.5) file.

Additional Information:

Data printed in the reports is entered into the database through the Vitals/ Measurement Data Entry option, or the Edit a Vital/Measurement Entered in Error option. Reports can be printed by individual patient, for all patients on a ward, or for patients in a specific hospital room/bed.

Restrictions:

Data prints in chronological order.

Menu Display:

```
Select Vitals/Measurement Option: 2  Vitals/Measurements Results Reporting


    1       V/M Graphic Reports
    2       Latest Vitals Display for a Patient
    3       Latest Vitals by Location
    4       Cumulative Vitals Report
    5       Print Vitals Entered in Error for a Patient
```

Screen Prints:

```
Select Vitals/Measurements Results Reporting Option: 4  Cumulative Vitals
Report
```

Print by patient.

```
Vitals by (A)ll patients on a ward, (S)elected Rooms on ward, or (P)atient? P

Select PATIENT NAME:    STARK,ANTHONY L.        01-19-25    589632111    NSC
VETERAN
```

Enter patient name.

```
Start with DATE (TIME optional): JAN 3,1993@10:00//1/1/95  (JAN 01, 1995)
```

Enter an appropriate beginning date for this report. The default date is the date of admission for inpatients or T-7 for outpatients.

Go to DATE (TIME optional): NOW// **<RET>** (FEB 25, 1997@09:46)

Enter appropriate ending date for this report.

DEVICE: Enter appropriate response

```
FEB 25, 1997 (10:52)     Cumulative Vitals/Measurements Report        Page 1
------------------------------------------------------------------------------
07/05/95
14:00
    T:   97.7 F (36.5 C)  (ORAL)
    P:   89  (RADIAL)
    R:   20
    B/P: 145/90  (R ARM, SITTING)
    Ht:  72.00 in (182.88 cm)
    Wt:  225.00 lb (102.27 kg)
    Body Mass Index: 31*
06/18/96
08:00
    P:   62  (RADIAL)
    R:   20
    B/P: 122/68  (R ARM, SITTING)
08:01
    B/P: 102/60* (L ARM, SITTING)
08:02
    B/P: 100/60* (R ARM, STANDING)
08:03
    B/P: 120/70  (L ARM, STANDING)
08:04
    B/P: 110/60* (R ARM, LYING)
08:05
    B/P: 110/70  (L ARM, LYING)
02/17/97
08:00
    T:   99.0 F (37.2 C)  (ORAL)
    P:   75  (LEFT, RADIAL, PALPATED, SITTING)
    R:   14  (SITTING)
    B/P: 120/70  (L ARM)
    Ht:  72.00 in (182.88 cm)
    Wt:  200.00 lb (90.91 kg) (ACTUAL, STANDING)
    Body Mass Index: 27
    Pulse Ox.: 92 % with supplemental O2 30% 3.5L/min
         via MASK
02/19/97
14:00
    T:   98.7 F (37.1 C)  (ORAL)
    P:   70  (LEFT, RADIAL)
    R:   20  (STANDING)
    B/P: 120/60* (L ARM, STANDING)
    Ht:  72.00 in (182.88 cm)
    Wt:  205.00 lb (93.18 kg) (ACTUAL, STANDING)
    Body Mass Index: 28*
    Pulse Ox.: 98 % with supplemental O2 25% 4L/min
         via MASK
    Pain: 5
```

The following legend is printed on the bottom of the report.

```
*** (E) - Error entry

STARK,ANTHONY L  112-33-4443  NOV 4,1985   11 YRS  MALE          VAF 10-7987j
Unit: 4E                       Room: 500-3
Division: Hines
```

Menu Access:

The Cumulative Vitals Report option is accessed through the Vitals/Measurements Results Reporting option of the Vitals/Measurement menu.

GMRV ERROR REPORT

Print Vitals Entered in Error for a Patient

Description:

This option prints a report of all vitals/measurements entered in error for a particular patient for a specific date range. Data comes from the GMRV Vital Measurement (#120.5) file.

Additional Information:

Patient information printed in this report was entered into the database through the Edit a Vital/Measurement Entered in Error option.

Menu Display:

```
Select Vitals/Measurement Option: 2  Vitals/Measurements Results Reporting


    1       V/M Graphic Reports
    2       Latest Vitals Display for a Patient
    3       Latest Vitals by Location
    4       Cumulative Vitals Report
    5       Print Vitals Entered in Error for a Patient
```

Screen Prints:

```
Select Vitals/Measurements Results Reporting Option: 5  Print Vitals Entered
in Error for a Patient
Select PATIENT NAME: STARK,ANTHONY L.         01-19-25       589632111
```

Enter patient name.

```
Start with DATE (TIME optional): T-7//1/1/97  (JAN 01, 1997)
```

Enter appropriate start date.

```
go to DATE (TIME optional): NOW// <RET> (FEB 25, 1997@12:37)
```

Enter appropriate end date.

```
DEVICE: HOME//    Enter appropriate response
```

```
FEB 25,1997 (11:00)   ENTERED IN ERROR VITAL/MEASUREMENT REPORT      PAGE 1
Patient: STARK,ANTHONY L.     112-33-4443

Date Vit./Meas. taken                                 User who made error
-------------------------------------------------------------------------

FEB 25, 1997@06:30   TEMPERATURE                      WYMAN,SANDRA
   Reason: incorrect reading
   (Revised)  102.1 F  (38.9 C)* (ORAL)
   (Bad data)  99 F  (37.2 C) (ORAL)

FEB 25, 1997@06:30   TEMPERATURE
   Reason: incorrect reading
   (Revised)  102.1 F  (38.9 C)* (ORAL)
   (Bad data)  102 F  (38.9 C)* (ORAL)

FEB 25, 1997@06:30   PAIN                             WYMAN,SANDRA
   Reason: incorrect reading
   (Revised)  3
   (Bad data)  5
```

Data might not appear in the Revised Data column under certain conditions, for
example, when original data was associated with another patient.

Menu Access:

The Print Vitals Entered in Error for a Patient option is accessed through the
Vitals/Measurements Results Reporting option of the Vitals/Measurement menu.

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